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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2007		Complete if Known Application Number 10/559,859-Conf. #7420 Filing Date June 7, 2004 First Named Inventor Neil C. Bremner Examiner Name Katy E. Meyer Art Unit 3727 Attorney Docket No. CAF-34802/03	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT	(\$)	60.00	

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 07-1180 Deposit Account Name: Gifford, Krass, Sprinkle, Anderson & Citkowski,
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES Small Entity		SEARCH FEES Small Entity		EXAMINATION FEES Small Entity		
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description	Fee (\$)	Small Entity Fee (\$)					
Each claim over 20 (including Reissues)	50	25					
Each independent claim over 3 (including Reissues)	200	100					
Multiple dependent claims	360	180					
Total Claims - 20 = _____ x _____ = _____ HP = highest number of total claims paid for, if greater than 20.	Extra Claims Fee (\$) Fee Paid (\$)	Multiple Dependent Claims Fee (\$) Fee Paid (\$)					
Indep. Claims - 3 = _____ x _____ = _____ HP = highest number of independent claims paid for, if greater than 3.	Extra Claims Fee (\$) Fee Paid (\$)						
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____	Extra Sheets Fee (\$) Fee Paid (\$)	Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)					
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							Fees Paid (\$)
Other (e.g., late filing surcharge): _____ Petition for Extension of Time - 1 Month							\$60.00

SUBMITTED BY			
Signature	/Ronald W. Citkowski/	Registration No. (Attorney/Agent)	31,005
Name (Print/Type)	Ronald W. Citkowski	Telephone	(248) 647-6000
		Date	October 1, 2007